PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notificate	ed below or directed oth	ng the Patent, an nerwise in Block	dvance of	rders and notification a) specifying a new c	orres	pondence address	; and/or	(b) man	caung a separ	nc ree	ADDRESS IO	
('UKKENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
30431	7590 07/03	/2008										
STMICROELECTRONICS, INC. MAIL STATION 2346 1310 ELECTRONICS DRIVE						Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
CARROLLTON, TX 75006						(Deposite's name)						
	•					·					(Signature)	
											(Date)	
APPLICATION NO.	FILING DATE	FILING DATE		FIRST NAMED INVEN	TOR	ATTO		RNEY DOCKET NO.		CONFIRMATION NO.		
09/694,051	09/694.051 10/20/2000			Frank Randolph Brya		96-C-126R		126RE	RE (1678-31)		8788	
ITTLE OF INVENTION		V		·		2021 2.10 2021		TATA	PSP40, DHE	T	ATT NIE	
APPLN, TYPE	SMALL ENTITY	SMALL ENTITY ISSUE FEE DUE		PUBLICATION FEE D		PREV. PAID ISSU	it. PEE			DATE DUE		
nonprovisional	NO	\$1440		\$0 CLASS-SUBCLASS		. SO	\$1440		\$1440	10/03/2008		
• EXAMINER ART UNIT			11	l								
NGO, N		. 2818		257-392000			·					
Change of correspond CFR 1.363).	2. For printing on the patent front page, list Lisa K. Jorgenson											
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) anached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single furn (having as a member a								
Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				registered attorney of agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.								
	ND RESIDENCE DATA											
PLEASE NOTE: Un recordation as set fort	less an assignee is ident th in 37 CFR 3.11. Com	ified below, no pletion of this fo	assigned rm is NO	i a substitute for thin	gana	assignment.			below, the do	cument h	as been filed for	
(A) NAME OF ASSI	(B) RESIDENCE: (CITY and STATE OR COUNTRY)											
STMicroele	Carrollton, Texas											
Please check the appropr	riate assignee category of	r categories (will	noi be p	rinted on the patent):		Individual 🙆 C	'orporati	on or oth	er private gro	ip entity	Government	
4a. The following fee(s) Structure Stru	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.											
Publication Fee (No small entity discount permitted)				Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of Copies				The Director is hereby authorized to charge the required feets), any deficiency, or credit any overpayment, to Deposit Account Number 19-1353 (enclose an extra copy of this form).								
5. Change in Entity Sta											_	
	is SMALL ENTITY stat			☐ b. Applicant is n								
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if req records of the United St	uired) will not b ites, Patent and T	e accepte Frademari	ed from anyone other t k Office.	han u	he applicant: a reg	istered a	illomey	or agent; or the	assignee	or other party in	
Authorized Signature	7/////	M				Date/(クート	L- 0	8			
Typed or printed name	Patrick C.R	. Holmes	,			Registration	No	46	5,380			
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450. Alexandria, \ Alexandria, Virginia 22.	d application form to the ions for reducing this but irginia 22313-1450. DO 315-1450.	rden, should be O NOT SEND F	sent to the	r depending upon the ne Chief Information (COMPLETED FORM	office IS T	THIS ADDRES	i Traden S. SENI	s on the nark Offi O TO: Co	amount of the ce, U.S. Depa ommissioner f	rtment of or Patents	quire to complete. Commerce P.O.	
Under the Panerwork Re	eduction Act of 1995, no	DELEGANS BLC LCCC	א טו עסוווו	SINGU TO A CONCUTON (រយោ	orioaucai unicss u	unajnay:	o a vano	COMBO COMBO	HIIIIOCT .		